



Family News

News and Information for Families of individuals at Muscatatuck SDC and Madison State Hospital during the transition to community-based services.

November 2002

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Governor's Commission on Home & Community-Based Services Meeting Schedule

<u>Date</u>	<u>Location</u>	<u>Time</u>
12/19/02	*Crossroads	10:00-2:00
01/23/03	**IGCS – Conf. Rm. A	10:00-2:00
02/27/03	**IGCS – Conf. Rm. A	10:00-2:00
03/27/03	**IGCS – Conf. Rm. A	10:00-2:00
04/24/03	**IGCS – Conf. Rm. A	10:00-2:00
05/22/03	*Crossroads	10:00-2:00
06/19/03	*Crossroads	10:00-2:00

*Crossroads Rehabilitation Center, Inc.
4740 Kingsway Dr., Indianapolis

**IGCS – Indiana Government Center South
402 W. Washington St., Indianapolis

Worth Repeating.....

Governor's Commission on Home and Community-Based Services

The Governor's Commission on Home and Community-Based Services is to develop short and long-term strategies to create or expand community capacity for persons at risk of being institutionalized, or for those currently in an institution or nursing home, within Indiana's long-term care service delivery system.

The Commission has established task forces to carry out its mission.

- Community Living Options –
Anne N. Jacoby, Chairperson
- Community Personal Assistance Services and Supports –
Kathy Davis, Chairperson
- Children at Risk –
Denny Jones, Chairperson
- Housing –
John Dickerson, Chairperson
- Transportation and Employment –
Curt Wiley, Chairperson

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www.in.gov/fssa/community/

Report on the Required SB 217 Muscatatuck State Developmental Center Public Hearing

A public hearing to gather input about the effects of closing Muscatatuck State

the most often expressed concern was that of the quality of care the client would receive if placed in a community setting

Developmental Center (MSDC) was held at the Jennings County library in North Vernon on November 6, 2002. Approximately 150 individuals attended. The hearing was an opportunity for the public to present testimony to a

panel comprised of Family and Social Services Administration staff and members of the Southeast Regional Advisory Panel.

Family members, advocates for people with mental illness or developmental disabilities, staff from Muscatatuck, and Mayor John Hall of North Vernon were all present to voice their thoughts. Issues commented on included, client and community safety, client benefits and economic impacts of the center's closure. However, the most often expressed concern was that of the quality of care the client would receive if placed in a community setting. Questions were raised about the guidelines group homes must follow, degrees of supervision, levels of facility readiness, and the need for knowledgeable, skilled staff.

Concerns were also expressed about services clients would receive once Muscatatuck is closed and community placements have occurred. Additionally, both staff and family members asked if covered benefits would change.

Testimonies concluded with Mayor Hall voicing his express beliefs that MI/DD individuals would suffer both physical and mental stress by moving to a group home. The second issue raised by Mayor Hall was that of the fiscal impact the closing would create. Mayor Hall estimated the closing would bring about the loss of 800 jobs in North Vernon and cost the community some \$25 million per year in revenues.

Many questions were raised at the hearing, and this newsletter will begin a Question and Answer section in the January 2003 issue to help provide more information.



The Arc Initiatives Approved by MR/DD Commission and FSSA

A critical issue advanced by The Arc of Indiana to the MR/DD Commission was approved in draft legislation by the MRDD Commission at their final meeting on October 23rd. They have also received support from FSSA. It would allow applications to be mailed directly to FSSA for determination of Medicaid home and community-based services eligibility. This would allow case managers and advocates to assist families in the application process, as well. It eliminates the step of families having to go to a local Division of Family and Children office to submit an application for Medicaid.

Indiana seniors get some relief

Indiana seniors may need help this winter and in the coming year as the Social Security cost-of-living increase is a nominal 1.4% while the Medicare monthly premium is increased to \$58.70.

Seniors eligible for HoosierRx can now receive more than a 50% discount on the cost of their prescription medications -directly at their pharmacy- rather than waiting for a refund check.

HoosierRx is Indiana's prescription drug plan for seniors. It has recently transitioned from a refund program to a drug card



program. The card allows eligible seniors to receive their medication discounts without waiting.

They will receive their 50% discount on prescriptions until they reach their yearly benefit limit of either \$500, \$750 or \$1000. These limits are based on income. Even after reaching their limit, they should continue to use their HoosierRx Drug Card for other available discounts.

HoosierRx is enrolling Indiana seniors statewide with plans to help as many as 30,000 persons by June 2003.

To be eligible for the HoosierRx Drug Card, an individual must meet the following requirements:

- Age 65 or older.
- No prescription drug coverage through insurance or Medicaid, including Medicaid with a spend-down.

- Monthly income must be less than \$997 for a single or widowed individual or less than \$1,344 for a married couple living together.

To apply for the HoosierRx Drug Card or to receive more information call toll-free at 1-866-267-4679 or visit the HoosierRx web-site at:

www.IN.gov/HoosierRx.



Waiver Information Network Workshops

The Waiver Information Network (WIN) is conducting workshops throughout Indiana to provide up-to-date information on Indiana's Medicaid waiver programs and how they can help provide eligible people with disabilities the supports they need to live in the community. There is no need to pre-register for the workshops and no cost to attend. Please share this information with others in your area. For more information go to the Arc of Indiana web site:


www.arcind.org/win_workshop_announcement.



FSSA REGIONAL PLANNING SERIES – PART I

The Southeast Regional Planning Task Force has worked diligently over the past year to make services available in the 18-county region. The outreach and transition teams currently help link those in need with community-based services, ensuring that all services – at home, in the community, or in a facility – are of high quality. Work is well underway toward a 2004 completion of the new regional center in Madison. And, proposals for four-bedroom homes for the medically fragile in the Jennings County area are also being evaluated. Local input was key in determining needed services.

As FSSA moves forward with creating a permanent Southeast Regional Advisory



It will establish task forces and a consumer advisory committee, and produce specific short and long-term strategies to address problems, such as a lack of trained caregivers or insufficient transportation.

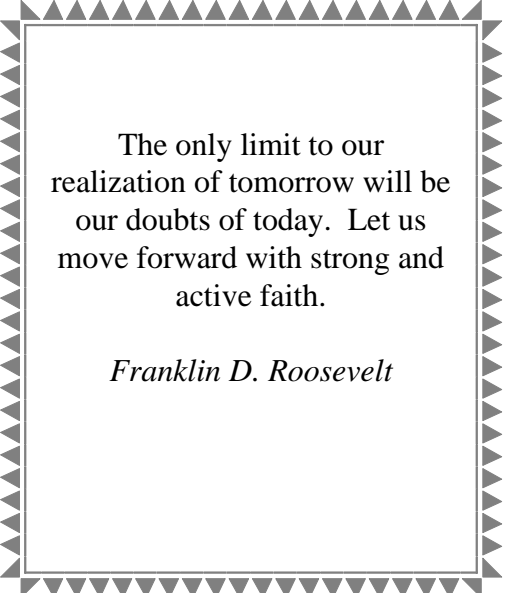
Board, we are starting to work on the next service regions in Indiana: Northeast and Central. An array of services will be available to people with developmental disabilities, mental illness, and addictions.

To make sure that occurs, funds will need to be directed away from institutions and placed into community-based services. The Governor's Commission on Home and Community-Based Services will assist FSSA in building the community capacity to serve citizens around the state. The Commission will work with local individuals and entities, and a number of state agencies to find ways to improve the

quality and increase the availability of community service options. For the cost of serving one person in an institution, three people can be served in the community. By balancing the system to no longer emphasize facilities, more people can get assistance and get it sooner.

FSSA cannot, as had been planned, close Muscatatuck State Developmental Center in June 2003 or close the Evansville Psychiatric Children's Center. The cost of operating these facilities is more than \$56M a year for MSDC and \$3.3M for EPCC – funds that cannot be used for community-based services.

Therefore the Governor's Commission on Home and Community-Based Services will conduct meetings over the next year to hear about needed services and barriers in the current long-term care system. It has established task forces and a consumer advisory committee to produce specific short and long-term strategies to address challenges, such as a lack of trained caregivers or insufficient transportation.



The only limit to our realization of tomorrow will be our doubts of today. Let us move forward with strong and active faith.

Franklin D. Roosevelt